

## DMV Lane Technician Observation Report

DMV Technician: <u>Griffith, Ronald</u>		Position: <u>1 or 2</u>	
Station: <u>ND</u>	Date: <u>9-17-12</u>	Time: <u>2:07</u>	
Vehicle Make: <u>Mercedes Benz</u>	Model: <u>C320</u>	Year: <u>2003</u>	
GVWR:	Fuel Type: <u>GAS</u>	Registration Number: <u>300234</u>	
Auditor: <u>Carroll</u>		Covert / Overt (circle one)	
	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	<input checked="" type="checkbox"/>		
2. Was <b>Emissions</b> testing required?	<input checked="" type="checkbox"/>		
a) Was Emissions testing performed using OBD?	<input checked="" type="checkbox"/>		
b) Was Emissions testing performed using Analyzer Probe?			<input checked="" type="checkbox"/>
c) Was Emissions testing performed using Paddle(s)?			<input checked="" type="checkbox"/>
d) Was Emissions testing performed using Clip?			<input checked="" type="checkbox"/>
3. Was <b>Catalytic Converter</b> inspection required?		<input checked="" type="checkbox"/>	
a) Was Catalytic Converter inspection performed?			<input checked="" type="checkbox"/>
4. Was <b>Fuel Tank</b> pressure testing required?		<input checked="" type="checkbox"/>	
a) Was Fuel Tank pressure testing performed?			<input checked="" type="checkbox"/>
5. Was <b>Fuel Cap</b> pressure testing required?		<input checked="" type="checkbox"/>	
a) Was Fuel Cap pressure testing performed?			<input checked="" type="checkbox"/>
6. Is this test a <b>Re-check</b> from a prior failure?		<input checked="" type="checkbox"/>	
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?		<input checked="" type="checkbox"/>	
a) Was Two-Speed Idle testing performed?			
<b>Sussex County Only</b>			
8. Was <b>Curb Idle</b> testing required?			
a) Was Curb Idle testing performed?			
<b>Comment:</b>			

## DMV Lane Technician Observation Report

<b>DMV Technician:</b> <u>Cuevas Miguel</u>		<b>Position:</b> 1 or 2	
<b>Station:</b> <u>Wilmington N.C.</u>		<b>Date:</b> <u>9-17-12</u>	<b>Time:</b> <u>1:05</u>
<b>Vehicle Make:</b> <u>Honda</u>		<b>Model:</b> <u>Accord</u>	<b>Year:</b> <u>2002</u>
<b>GVWR:</b>	<b>Fuel Type:</b> <u>GAS</u>	<b>Registration Number:</b> <u>992 934</u>	
<b>Auditor:</b> <u>Covindale</u>		<b>Covert / <u>Overt</u> (circle one)</b>	
		<b>YES</b>	<b>NO</b>
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	
2. Was <b>Emissions</b> testing required?		<input checked="" type="checkbox"/>	
a) Was Emissions testing performed using OBD?		<input checked="" type="checkbox"/>	
b) Was Emissions testing performed using Analyzer Probe?			<input checked="" type="checkbox"/>
c) Was Emissions testing performed using Paddle(s)?			<input checked="" type="checkbox"/>
d) Was Emissions testing performed using Clip?			<input checked="" type="checkbox"/>
3. Was <b>Catalytic Converter</b> inspection required?			<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?			<input checked="" type="checkbox"/>
4. Was <b>Fuel Tank</b> pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?			<input checked="" type="checkbox"/>
5. Was <b>Fuel Cap</b> pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?			<input checked="" type="checkbox"/>
6. Is this test a <b>Re-check</b> from a prior failure?			<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?			
a) Was Two-Speed Idle testing performed?			
<b>Sussex County Only</b>			
8. Was <b>Curb Idle</b> testing required?			
a) Was Curb Idle testing performed?			
<b>Comment:</b>			